

TRANSMITTAL FORM

Application Serial Number 09/430,198

Filing Date October 29, 1999

First Named Inventor Zahniser

Group Art Unit 2721

Examiner Name Not yet assigned

Attorney Docket No. CYM-034 (2174/37)

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form 	<input checked="" type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <ul style="list-style-type: none"> <input type="checkbox"/> Formal Drawing(s) 	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <ul style="list-style-type: none"> <input type="checkbox"/> Appeal Communication to Group (<i>Appeal Notice, Brief, Reply Brief</i>)
<input type="checkbox"/> Amendment/Response <ul style="list-style-type: none"> <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) 	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <ul style="list-style-type: none"> <input type="checkbox"/> To Convert to a Provisional Application 	<input type="checkbox"/> Status Letter <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____] <ul style="list-style-type: none"> <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) 	<input type="checkbox"/> Terminal Disclaimer <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 	<ul style="list-style-type: none"> <input type="checkbox"/> Additional Enclosure(s)
<input checked="" type="checkbox"/> Extension of Time Request <ul style="list-style-type: none"> <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application 	<input type="checkbox"/> Information Disclosure Statement <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Small Entity Statement 	
<input type="checkbox"/> Form PTO-1449 <ul style="list-style-type: none"> <input type="checkbox"/> Copies of IDS Citations 	<input type="checkbox"/> Certified Copy of Priority Document(s) <ul style="list-style-type: none"> <input type="checkbox"/> Request for Refund 	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application <ul style="list-style-type: none"> <input type="checkbox"/> After Allowance Communication to Group 		

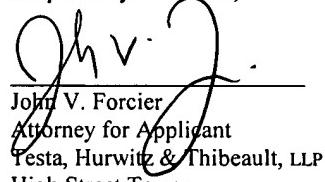
CORRESPONDENCE ADDRESS

SIGNATURE BLOCK

Direct all correspondence to: Patent Administrator
 Testa, Hurwitz & Thibeault, LLP
 High Street Tower
 125 High Street
 Boston, MA 02110
 Tel. No.: (617) 248-7000
 Fax No.: (617) 248-7100

Date: June 28, 2000
 Reg. No. 42,545
 Tel. No.: (617) 248-7675
 Fax No.: (617) 248-7100

Respectfully submitted,


 John V. Forcier
 Attorney for Applicant
 Testa, Hurwitz & Thibeault, LLP
 High Street Tower
 125 High Street
 Boston, MA 02110

Sedor \$

33-0



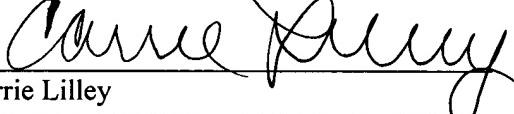
PATENT
Attorney Docket No. CYM-034

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Zanhiser
 SERIAL NO.: 09/430,198 GROUP NO.: 2721
 FILING DATE: October 29, 1999 EXAMINER: Not yet assigned
 TITLE: Apparatus and Methods for Verifying the Location of Areas of Interest
 Within a Sample in an Imaging System

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to Box Missing Parts, Assistant Commissioner for Patents, Washington, DC 20231 on June 28, 2000.

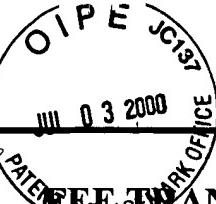

 Carrie Lilley

Box Missing Parts
 Assistant Commissioner for Patents
 Washington, D.C. 20231

Sir:

Submitted herewith is/are:

1. Transmittal Form (1 pg.)
2. Fee Transmittal (1 pg.)
3. Check in the amount of \$1,505.00.00
4. Five Month Extension of Time (1 pg.)
5. Copy of Notice to File Missing Parts (1 pg.)
6. Executed Declaration and Power of Attorney (3 pgs.)
7. Small Entity Statement (1 pg.)
8. Return receipt postcard
9. Certificate of First Class Mailing (1 pg.)



Note: Effective January 10, 2000.
Patent fees are subject to annual revision

Complete if Known	
Application Serial Number	09/430,198
Filing Date	October 29, 1999
First Named Inventor	Zahniser
Group Art Unit	2721
Examiner Name	Not yet assigned
Attorney Docket No.	CYM-034 (2174/37)

METHOD OF PAYMENT

1. Payment Enclosed:
 Check Money Order Other
2. The Commissioner is hereby authorized to credit or charge any fee indicated below to Deposit Account No. 20-0531.
 - Required Fees (copy of this sheet enclosed).
 - Additional fee required under 37 CFR 1.16 and 1.17.
 - Overpayment Credit.

FEE CALCULATION

1. FILING FEE

Large Entity		Fee (\$)	Fee Description	Fee Paid
690	Utility filing fee	760		
310	Design filing fee	0		
150	Provisional filing fee	0		
	Number Filed	Number Extra	Rate	Amount
Total Claims	22	- 20 = 2	x \$ 18.00 =	36.00
Independent Claims	6	- 3 = 3	x \$ 78.00 =	234.00
<input type="checkbox"/> Multiple Dependent Claim(s), if any			\$260.00 =	0
			TOTAL:	1,030.00
			SMALL ENTITY DISCOUNT:	515.00
			SUBTOTAL (1)	(\$)
				515.00

2. AMENDMENT CLAIM FEES

Claims Remaining	Highest No. Previously	Present Extra	Rate	Fee Paid	
Total	- =	0	x \$ 18.00 =	0.00	
Indep.	- =	0	x \$ 78.00 =	0.00	
<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$260.00 =	0.00	
			TOTAL:	(\$)	0.00
			SMALL ENTITY DISCOUNT:	(\$)	0.00
			SUBTOTAL (2)	(\$)	0.00

SUBTOTAL (3) (\$)

\$990.00

SUBTOTAL (1) \$515.00

SUBTOTAL (2) 0.00

SUBTOTAL (3) \$990.00

TOTAL (\$)

1,505.00

CORRESPONDENCE ADDRESS

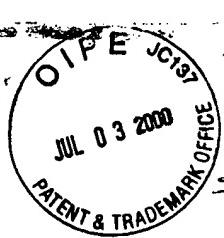
Direct all correspondence to:

Patent Administrator
Testa, Hurwitz & Thibeault, LLP
High Street Tower-125 High Street
Boston, MA 02110
Tel. No.: (617) 248-7000
Fax No.: (617) 248-7100

Date: June 28, 2000
Reg. No.: 42,545
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Fax No.: (617) 248-7100

Respectfully submitted,

J.V. Forcier
John V. Forcier
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UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office

Address: COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NO./TITLE
09/430,198	10/29/99	ZAHNISER	P CTR-1134

01221201

TESTA HURWITZ & THIBEAULT LLP
PATENT ADMINISTRATOR
HIGH STREET TOWER
125 HIGH STREET
BOSTON MA 02110

NOT ASSIGNED

2721

12/01/99

NOTICE TO FILE MISSING PARTS OF APPLICATION
Filing Date Granted

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given TWO MONTHS FROM THE DATE OF THIS NOTICE within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1:136(a). If any of items 1 or 3 through 5 are indicated as missing, the SURCHARGE set forth in 37 CFR 1.16(e) of \$65.00 for a small entity in compliance with 37 CFR 1.27, or \$130.00 for a non-small entity, must also be timely submitted in reply to this NOTICE to avoid abandonment.

If all required items on this form are filed within the period set above, the total amount owed by applicant as a
 small entity (statement filed) non-small entity is \$ 130.00.

1. The statutory basic filing fee is:
 missing.
 insufficient.

Applicant must submit \$_____ to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).

2. The following additional claims fees are due:

\$ _____ for _____ total claims over 20.

\$ _____ for _____ independent claims over 3.

\$ _____ for multiple dependent claim surcharge.

Applicant must either submit the additional claim fees or cancel additional claims for which fees are due.

3. The oath or declaration:
 is missing or unsigned.
 does not cover the newly submitted items.
An oath or declaration in compliance with 37 CFR 1.63, including residence information and identifying the applicant, the above Application Number and Filing Date is required.

4. The signature(s) to the oath or declaration is/are by a person other than inventor or person qualified under 37 CFR 1.43 or 1.47.
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.

5. The signature of the following joint inventor(s) is missing from the oath or declaration:

An oath or declaration in compliance with 37 CFR 1.63 listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date, is required.

6. A \$50.00 processing fee is required since your check was returned without payment (37 CFR 1.21(m)).

7. Your filing receipt was mailed in error because your check was returned without payment.

8. The application was filed in a language other than English.
Applicant must file a verified English translation of the application, the \$130.00 set forth in 37 CFR 1.17(k), un previously submitted, and a statement that the translation is accurate (37 CFR 1.52(d)).

9. OTHER: _____

Direct the reply and any questions about this notice to "Attention: Box Missing Parts."

A copy of this notice MUST be returned with the reply.

**Customer Service Center
Initial Patent Examination Division (703) 308-1202**

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01	FC-201			
02	FC-202			
03	FC-203			
04	FC-205			